									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD													
Effective October 1, 2000									04805384				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			. 17					RATE	FEE	] [	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 355.00	ОЯ	Basic Fee	710.00	
TOTAL CHARGEABLE CLAIMS			/7 minus 20=		· Ø			X\$ 9:		OR	X\$18=		
INDEPENDENT CLAIMS			7_ minus 3 -		4			X40=		OR	X80≃		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR	+270=		
· If the difference in column 1 is less than zero, enter "O" in						olumn 2		TOTA	L	OR	TOTAL		
1   GLAIMS AS AMENDED - PART II								OTHER THAN					
Ш	101104	(Column 1)	<del></del>	(Colum	mn 2)			SMALL	L ENTITY	OR T	SMALL	ADDI:	
Ā		REMAINING AFTER		NUM	BER OUSLY	PRESENT EXTRA		RATE			RATE	TIONAL FEE	
AMENDMENT	Total	AMENDMENT	Minus	PAID	FOR V()	- /	1	X\$ 9:	FEE	OR	X\$18=	725	
Ē	Independent	. 4	Minus · ·		यो			X40=		OA	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						]	_	<del></del>	┪┈	+270=		
415								+135	L	OR	TOTAL		
1.	6-23 05 (Calumn 1) (Column 2) (Column 3)							ADDIT, FEEOR ADDIT, FEE					
Ľ	, 0-	4		ADDI-	٠ •	<u> </u>	ADDI-						
AMENDMENT 0		CLAMAS REMAINING AFTER AMENOMENT	· •	PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE		1	RATE	TIONAL FEE	
3	Total	· i7	Minus		20	. /	1	X\$ 9:		OR	X\$18⇒		
	Independent	. '	Minus	***	1	1 ./		X40-		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135		┨¨`	+270=		
									AL	OR	TOTAL		
									<u> </u>	OR	ADDIT. FEE		
<b> _</b>		(Column 1)	<del>, ,</del>		ımn 2) HEST	(Column 3	)			-		T 4551	
AMENDMENT C	Jan San San	REMAINING AFTER AMENOMENT	-	PREV	MBER NOUSLY D FOR	PRESENT EXTRA		RÁTI	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
SE SE	Total		Minus	-			]	X\$ 9		OR	X\$18=		
	Independent	•	Minus			=	]	X40		OR	X80=	1	
Ľ	FIRST PRESE	NTATION OF N	IULTIPLE DE	PENDEN	IT CLAIM		_]	-		┨┈		<del>                                     </del>	
			+135		OR	+270=							
* If the entity in column 1 is test than the entity in column 2, write 0" in column 3. YOTAL  ** If the "Bighest Number Proviously Paid For" IN THIS SPACE is test than 20, enter "20."  **ADDIT. FEE  ***If the "Highest Number Proviously Paid For" IN THIS SPACE is test than 3, enter "3."										OR	TOTAL ADDIT, FEE		
"	The "Highest Nur The "Highest Nur	umber Previously Prober Previously Pr	eid For (Total )	er indepen	ident) is th	e highest num	ber k	ound in the	eppropriate i	out in c	olumn 1.		

FORM PTO-875

Palent and Trademade Office, U.S. DEPARTMENT OF COMMERC